

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 418).		Complete if Known	
FEE TRANSMITTAL For FY 2009		Application Number	10/575,027
		Filing Date	07/30/07
		First Named Inventor	Axel Bouchon
		Examiner Name	D. K. O'Dell
		Art Unit	1625
		Attorney Docket No.	83266(303989)
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	130.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

2. EXCESS CLAIM FEES			Small Entity Fee (\$)
Fee Description		Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)		52	26
Each independent claim over 3 (including Reissues)		220	110
Multiple dependent claims		390	195
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = _____ x _____ = _____		Multiple Dependent Claims	
		Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = _____ x _____ = _____			
HP = highest number of independent claims paid for, if greater than 3.			

3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
- 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____		Fee Paid (\$)	
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			Fees Paid (\$)
Other (e.g., late filing surcharge): 1251 Extension for response within first month			130.00

SUBMITTED BY			
Signature	/Nicholas J. DiCeglie, Jr./	Registration No. (attorney/agent)	51,615
Name (Print/Type)	Nicholas J. DiCeglie, Jr.	Telephone	(212) 308-4411
		Date	January 25, 2009